

APPENDIX A: PRE-TASK HAZARD ANALYSIS PROCESS

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PRE-TASK HAZARD ANALYSIS PROCESS

1.0 PURPOSE AND SCOPE

- A. This procedure establishes requirements for preparing a Pre-Task Hazard Analysis (PTHA) for construction projects at the Government's Lawrence Livermore National Laboratory (LLNL).
- B. Description: The PTHA is a task-driven process designed to ensure that every task receives proper safety planning prior to starting work. The PTHA shall become part of the daily work authorization for all work activities.
- C. Intent: The PTHA is a task-and-time-specific process that supplements other processes in place to help foster safe, timely, and quality work at the jobsite. It shall be developed as a team effort by Contractor's work crew and superintendent before any task is begun. The intent is to systematically plan specific tasks to be conducted in a safe and effective manner. The PTHA does not replace procedures set forth in Contractor's site safety program, but reinforces particular aspects of safety pertaining to specific day's work.

2.0 RESPONSIBILITIES

- A. Implementation of the PTHA process is the responsibility of Contractor's management and field teams and the Government's project team. Authority to perform identified tasks may be delegated to other qualified personnel, but responsibility remains with those named above.
- B. Contractor's Management Team: Contractor's management team (project manager and superintendent) is responsible for:
 - B.1 Ensuring adequate training in the PTHA process for all personnel working at the construction site.
 - B.2 Monitoring content of completed PTHA forms for quality and completeness.
 - B.3 Reporting PTHA worksheet content to the Government on a monthly basis.
- C. Contractor's Field Team (superintendent and work crew):
 - C.1 Contractor's Field Team (superintendent and work crew):
 - C.1.a Becoming knowledgeable of the PTHA process.
 - C.1.b Providing on-the-job training for Contractor's work crew.

- C.1.c Conducting meetings at the start of each new task or shift to lead the work crew through the job-planning process and development of the PTHA worksheet.
- C.1.d Documenting the PTHA using the attached worksheet.
- C.2 Contractor's Work Crew: Contractor's work crew is responsible for:
 - C.2.a Becoming knowledgeable of the PTHA process.
 - C.2.b Completing necessary training in the PTHA process.
 - C.2.c Participating in preparation of the worksheet at the start of each new task or shift.
 - C.2.d Conducting work activities in accordance with the PTHA.
- D. Government Project Team (project manager, construction manager, and construction inspector):
 - D.1 The Government's project manager is responsible for:
 - D.1.a Ensuring the project team members are trained in the PTHA process.
 - D.1.b Making provisions for adequate Contractor training and proper implementation of the PTHA process.
 - D.1.c Reviewing a sampling of Contractor's completed PTHA forms on a routine basis for appropriate content.
 - D.2 The Government's construction manager is responsible for:
 - D.2.a Reviewing Contractor's completed PTHA worksheets for consistency and adequate coverage.
 - D.2.b Continuously monitoring the overall PTHA process for effectiveness and informing the project manager and other team members of its findings.
 - D.2.c Identifying any additional training needs for Contractor's superintendent or work crew.
 - D.3 The Government's construction inspector is responsible for:
 - D.3.a Conducting training of Contractor personnel in the PTHA process.

- D.3.b Field monitoring the PTHA process to assure Contractor's work crews comply with the PTHA requirements.

3.0 PROCEDURE

- A. The sequence of action steps in the PTHA process and responsible individuals for each step are as described below.
- B. Identify Work Area and Task: Generally, the work to be performed will be covered in Contractor's site-specific safety plan. The PTHA shall cover specific tasks to be performed within a shift in a particular work area.
Note: A clear understanding of what the job entails from beginning to end is essential for an accurate and complete PTHA.
- C. Develop a Safe Plan of Action: Contractor's work crew assigned to perform the work shall develop the PTHA during the PTHA meeting, with guidance from Contractor's superintendent. Contractor's superintendent shall lead the work crew as they plan their work for the shift and solicit their participation in identifying hazards and hazard control measures, such as personnel protective equipment (PPE), required training, permits, procedures, and like items.
- D. Document PTHAs: Contractor's superintendent shall document PTHAs using the attached worksheet. Each member of Contractor's field team shall sign the completed worksheet. Signatures indicate the individuals have participated in development of the worksheet, understand the hazards, and agree to follow the completed worksheet. If Contractor's field team determines the scope of work and conditions have not changed from a previously completed PTHA, that PTHA may be reused. Contractor's field team shall, however, sign the PTHA worksheet each time it is used.
- E. Conduct PTHA Meetings: At least daily, and whenever a task presents a change of hazards from tasks under the currently used PTHA, Contractor's superintendent shall conduct a PTHA meeting. This is a brief (generally not more than 10 minutes) safety meeting to discuss tasks to be conducted during the work shift. When a task is continued from a previous day, the PTHA meeting shall include a review of the current PTHA and consideration of any new hazards or conditions that could exist. The PTHA meeting may be combined with a "tool-box" meeting or "morning safety" meeting; however, the PTHA meeting shall include a review of the PTHA currently in effect, or development of a new worksheet, and sign-off by each worker and the superintendent as noted in paragraph C above.

- F. Post Completed PTHA Worksheets: Contractor's superintendent shall post the completed worksheet immediately adjacent to the work area such that anyone may review the form throughout the work shift. In case of an incident, the PTHA shall be immediately evaluated for work conditions and procedures.
- G. Retain Completed PTHA Worksheets: Contractor's superintendent shall retain all PTHA worksheets. Furnish signed and dated copies of all worksheets to the Government's construction manager upon completion of the form and again at completion of the tasks described in the worksheet.
- H. Review the PTHA Process: Contractor shall verify the content and quality of the PTHA worksheets completed by its employees and lower-tier subcontractors. The Government's construction manager will utilize appropriate sampling techniques to monitor the quality of completed worksheets.

4.0 DOCUMENTATION

Each PTHA shall be documented using the attached form. Contractor shall retain hard copies of each worksheet for the duration of the activity. The Government's construction manager will also retain a copy of all PTHA records.

END OF PRE-TASK HAZARD ANALYSIS (PTHA) PROCESS
(Checklist and sample worksheet follow.)



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PLANT ENGINEERING CONTRACTOR PRE-TASK HAZARD ANALYSIS WORKSHEET



Work Request # _____ Task _____ Location of Task _____ Date _____

MAJOR WORK STEPS OF TASK	POTENTIAL HAZARDS	CONTROLS / SAFETY PLAN	TOOLS REQUIRED

Task Specific Required Inspection		Work Area Questions
Daily Lift Inspection	Inspected By/Name _____	Is there adjacent work and/or co-occupancy in work area? <input type="checkbox"/> Yes <input type="checkbox"/> No
Harness Inspection	Inspected By/Name _____	Other workers adjacent above or below work area? <input type="checkbox"/> Yes <input type="checkbox"/> No
Fire Extinguisher Inspection Current	Inspected By/Name _____	Did you notify them of your presence? <input type="checkbox"/> Yes <input type="checkbox"/> No
Cords – Properly Inspected	Inspected By/Name _____	Did you coordinate with adjacent work? <input type="checkbox"/> Yes <input type="checkbox"/> No
All Existing Systems Enabled	Inspected By/Name _____	Can you proceed with working safely? <input type="checkbox"/> Yes <input type="checkbox"/> No
		Barricades Set Up <input type="checkbox"/> Yes <input type="checkbox"/> No Removed at end of task <input type="checkbox"/> Yes <input type="checkbox"/> No

Pre-Task Review has been completed and each employee is taking the responsibility to ensure that all required training for this work activity is current, and that they are competent and qualified on all required tools/equipment – Print Name and Initial

Contractor Foreman/Superintendent Signature: _____ **Date:** _____

Instructions: Complete this form per task, per day. **1.** Fill in work request number, task, location and date. **2.** List **major work steps** of this task. **3.** Using the back side of this form as a guide, walk-through the work area and list **potential hazards** involved with each work step. **4.** List controls or **safety plan** to mitigate those hazards. **5.** List **required tools** to perform the job safely. **6.** Have each worker review the work area; assist with completing this form and print name and initial. **NOTE:** Multi Craft jobs require each discipline to complete separate form for their task. Review with all workers in work area. Each worker prints name and initials on all worksheets. **7.** Submit a copy of this form to the Construction Manager at completion of day. **NOTE: Work shall stop if conditions change, job scope changes, or a deficiency in the plan is noted. If any injuries or incidents occur, respond as appropriate, than contact the Construction Manager, Inspector, & Procurement Representative immediately**

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Permits/Required Reviews	Hazards	Safety Plan
<input type="checkbox"/> PE Construction Safety Video	<input type="checkbox"/> Overhead Utilities	<input type="checkbox"/> De-energization req. <input type="checkbox"/> Insulation blankets req. <input type="checkbox"/> Wire watcher req. <input type="checkbox"/> Req. clearance distance <input type="checkbox"/> Safe work zone marked
<input type="checkbox"/> PE Soil/Concrete Permit Video	<input type="checkbox"/> Crane or other Lifting Equipment Lifting, Rigging Objects	<input type="checkbox"/> Signalman assigned <input type="checkbox"/> Tag lines in use <input type="checkbox"/> Lifting equip inspected <input type="checkbox"/> Area around crane barricaded <input type="checkbox"/> Rigger Plan/Personal Protected
<input type="checkbox"/> Facility Work Permit	<input type="checkbox"/> Aerial Lift/Platform	<input type="checkbox"/> 100% Tie Off <input type="checkbox"/> Daily Inspection <input type="checkbox"/> Training Current <input type="checkbox"/> Access Permit/Custodial Possession Placard
<input type="checkbox"/> Asbestos Work	<input type="checkbox"/> Electrical	<input type="checkbox"/> Lock out/Tag out <input type="checkbox"/> Required Permit <input type="checkbox"/> Multi Energized source? <input type="checkbox"/> Confirm equip is de-energized <input type="checkbox"/> Review elect safety procedures
<input type="checkbox"/> Concrete Penetration/ Jack hammering Permit	<input type="checkbox"/> Excavations	<input type="checkbox"/> Required Permit <input type="checkbox"/> Inspect prior to entering <input type="checkbox"/> Barricades <input type="checkbox"/> Proper sloping/shoring <input type="checkbox"/> Access/egress provided
<input type="checkbox"/> Confined Space	<input type="checkbox"/> Fire Hazard = Cut, Weld, Burn, Grind, Solder	<input type="checkbox"/> Required Permit <input type="checkbox"/> Fire Extinguishers <input type="checkbox"/> Fire Watch <input type="checkbox"/> Adjacent areas protected <input type="checkbox"/> Unnecessary flammable material removed
<input type="checkbox"/> Critical Lift	<input type="checkbox"/> Vehicular Traffic and/or Heavy Equipment	<input type="checkbox"/> Traffic Barricades <input type="checkbox"/> Cones <input type="checkbox"/> Signs <input type="checkbox"/> Flagman <input type="checkbox"/> Lane closure <input type="checkbox"/> Communication with equipment operator <input type="checkbox"/> Surface condition
<input type="checkbox"/> Building Drain Work	<input type="checkbox"/> Noise > 85 db	<input type="checkbox"/> Hearing protection is required <input type="checkbox"/> Ear plugs/Muffs
<input type="checkbox"/> Excavation /Shoring Permit (Underground Location)	<input type="checkbox"/> Hand & Power Tools	<input type="checkbox"/> Inspect general cond. <input type="checkbox"/> Identified PPE required for each tool <input type="checkbox"/> Review safety operation manual <input type="checkbox"/> Guarding OK <input type="checkbox"/> GFCI in use
<input type="checkbox"/> Fire/Burning Permit	<input type="checkbox"/> Hand Hazards	<input type="checkbox"/> Check for sharp tools, materials and equipment <input type="checkbox"/> PPE gloves <input type="checkbox"/> Protect sharp edges as necessary
<input type="checkbox"/> Hoisting & Rigging	<input type="checkbox"/> Manual Lifting	<input type="checkbox"/> Review proper lifting tech. <input type="checkbox"/> Hand protection req <input type="checkbox"/> Clear pathway <input type="checkbox"/> Back support belts <input type="checkbox"/> Identify material requiring lifting equip
<input type="checkbox"/> Boom Proximity, Assembly/Brkdown	<input type="checkbox"/> Ladders	<input type="checkbox"/> Inspect general cond before use <input type="checkbox"/> Quarterly Ladder inspection <input type="checkbox"/> Ladder tied off <input type="checkbox"/> Proper angle/placement <input type="checkbox"/> Review ladder safety
<input type="checkbox"/> Lead Abatement	<input type="checkbox"/> Scaffolds	<input type="checkbox"/> Inspect general cond before use <input type="checkbox"/> Tags in place & Properly secured <input type="checkbox"/> Footings adequate <input type="checkbox"/> Toe boards used <input type="checkbox"/> Material properly stored
<input type="checkbox"/> Lock Out/Tag Out	<input type="checkbox"/> Slips, Trips, Falls	<input type="checkbox"/> Inspect for trip hazards <input type="checkbox"/> Extension cords properly secured <input type="checkbox"/> Work zone free of debris <input type="checkbox"/> Tools & Material properly stored
<input type="checkbox"/> Pneumatic Test	<input type="checkbox"/> Pinch Points Exposed (Rotating Equipment)	<input type="checkbox"/> Review area for potential pinch points or exposed rotation equipment <input type="checkbox"/> Near operating equip? <input type="checkbox"/> Hand/Body position <input type="checkbox"/> Loose clothing?
<input type="checkbox"/> Roof Access Permit	<input type="checkbox"/> Working w/Chemicals	<input type="checkbox"/> The task creates potential for direct contact with hazardous chemicals <input type="checkbox"/> Review MSDS <input type="checkbox"/> Have proper containers & labels <input type="checkbox"/> PPE
<input type="checkbox"/> Steel Erection/Decking/ Grating Plan	<input type="checkbox"/> Heat / Cold Stress Potential	<input type="checkbox"/> Heat stress monitoring (>85 degrees) <input type="checkbox"/> Liquids available <input type="checkbox"/> Cool down periods <input type="checkbox"/> Sun Screen <input type="checkbox"/> Review Heat/Cold stress
<input type="checkbox"/> Working Energized Circuits & Equipment	<input type="checkbox"/> Body Mechanics	<input type="checkbox"/> Proper clothing <input type="checkbox"/> Wind chill (<32degrees) <input type="checkbox"/> Warm up periods
<input type="checkbox"/> Low Voltage Outage Permit	<input type="checkbox"/> Environment (Endangered Species)	<input type="checkbox"/> Air emissions <input type="checkbox"/> Water discharge <input type="checkbox"/> Hazardous/other wastes <input type="checkbox"/> Awareness of endangered Species and habitat area
Required PPE	<input type="checkbox"/> Natural or Site Hazards	<input type="checkbox"/> Weather <input type="checkbox"/> Terrain <input type="checkbox"/> Adjacent operations <input type="checkbox"/> Biological hazards <input type="checkbox"/> Animal/reptiles/insect hazards
<input type="checkbox"/> Hard Hat/Correct Class	<input type="checkbox"/> Barricades/Covers for Overhead Work	<input type="checkbox"/> Caution barricade tape required <input type="checkbox"/> Danger barricade tape required <input type="checkbox"/> Warning signs <input type="checkbox"/> Cover over opening <input type="checkbox"/> Rigid railing required
<input type="checkbox"/> Ear Plugs/Ear Muffs	<input type="checkbox"/> Underground Utilities (Line Locating)	<input type="checkbox"/> Review as built <input type="checkbox"/> Subsurface surveys <input type="checkbox"/> Received dig permit <input type="checkbox"/> Required clearance distance <input type="checkbox"/> Safe work zone marked <input type="checkbox"/> Walk around
<input type="checkbox"/> Eye Protection	<input type="checkbox"/> Transporting Materials on Vehicle	<input type="checkbox"/> Tie down all loads <input type="checkbox"/> Secure materials on racks <input type="checkbox"/> Flag Ext Material
Safety Glasses	<input type="checkbox"/> Moving/Falling objects from height	<input type="checkbox"/> Tether small objects <input type="checkbox"/> Use rope, canvas bag <input type="checkbox"/> Barricade around potential fall area
Face Shield	<input type="checkbox"/> Pressurized gas hazard	<input type="checkbox"/> LOTO process <input type="checkbox"/> Take care near small fragile lines
Chemical Goggles	<input type="checkbox"/> Laser hazard/Beam path	<input type="checkbox"/> Stay outside of identified areas <input type="checkbox"/> Proper laser eyewear
Welding Hood	<input type="checkbox"/> O2 Deficiency, Argon hazard And/or Freon	<input type="checkbox"/> Observe signs <input type="checkbox"/> Use O2 monitor <input type="checkbox"/> Involve ESH Team <input type="checkbox"/> Sniff before entry
<input type="checkbox"/> Hand Protection	<input type="checkbox"/> Wall/Ceiling Penetration	<input type="checkbox"/> Scan area where penetration will take place <input type="checkbox"/> Perform Walk Around
Arm Sleeves	<input type="checkbox"/> Magnetic Field Hazards	<input type="checkbox"/> No pacemakers, defibrillators <input type="checkbox"/> Heed warning signs
Cut-Resistant Gloves		
Welders Gloves		
Surgical Gloves		
Rubber Gloves		
Elect Insulated Gloves		
Other _____		
<input type="checkbox"/> Foot Protection		
Sturdy Work Boots		
Safety Toe Boots		
Rubber Boots		
Rubber Boots cover		
Dielectric Footwear		
<input type="checkbox"/> Respiratory Protection		
<input type="checkbox"/> Special Clothing		
Tyvek		
Nomex III		
Rain Suit		
Safety Vest		
Other _____		
<input type="checkbox"/> Fall Protection		
Harness		
Double Lanyard		
Tool Tethers		
Anchorage Point		
Retractable Device		
Horizontal lifeline system		
Fall Clearance Distance		
Fall Rescue/Retrieval Plan		